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B6 Summary (Official Form 6 - Summary) (12/07)

# **United States Bankruptcy Court**District of South Carolina

In re	Joann Carol Vassallo		Case No	10-01459	
_		Debtor ,			
			Chapter	1	3

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	226,000.00		
B - Personal Property	Yes	4	6,975.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		211,858.82	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		5,443.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		6,220.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,588.13
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,532.80
Total Number of Sheets of ALL Schedu	ıles	19			
	To	otal Assets	232,975.00		
			Total Liabilities	223,521.82	

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Form 6 - Statistical Summary (12/07)

# **United States Bankruptcy Court**District of South Carolina

In re	Joann Carol Vassallo		Case No	10-01459
-		Debtor		
			Chapter	13

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	3,139.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	3,139.00

#### State the following:

Average Income (from Schedule I, Line 16)	3,588.13
Average Expenses (from Schedule J, Line 18)	2,532.80
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,788.13

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		9,400.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	5,443.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		6,220.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		15,620.00

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B6A (Official Form 6A) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459	
_		Debtor	,		

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

PRIMARY RESIDENCE: 3550 CANNONS CAMPGROUND ROAD, SPARTANBURG, SC, SPARTANBURG COUNTY; TMS# (3-13-00-043.03), TAX APPRAISAL VALUE: (\$183,200), DEBTOR PURCHASED HOME IN MAY 2006 FOR (\$183,000), DEBTOR'S OPINION OF CURRENT MARKET VALUE: (\$226,000)

Sub-Total > **226,000.00** (Total of this page)

226,000.00

197,858.82

Total > 226,000.00

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

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B6B (Official Form 6B) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459	
_		Debtor			

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	х			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.		HOUSEHOLD GOODS: COUCH, (3) BEDS, (2) DRESSERS, (2) CHEST OF DRAWERS, NIGHTSTANDS, DINING TABLE WITH CHAIRS, COUCH, CHAIRS, REFRIGERATOR, COMPUTER	-	1,600.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		ASSORTED BOOKS, COLLECTIBLES & PICTURES	-	75.00
6.	Wearing apparel.		CLOTHING: ASSORTED USED CLOTHING	-	200.00
7.	Furs and jewelry.		JEWELRY: ASSORTED JEWELRY	-	500.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			

3 continuation sheets attached to the Schedule of Personal Property

2,375.00

Sub-Total >

(Total of this page)

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In 1	re Joann Carol Vassallo		·	Case No	<u>10-01459</u>	)
			Debtor			
		SCI	HEDULE B - PERSONAL PROPER' (Continuation Sheet)	ТҮ		
	Type of Property	N O N E	Description and Location of Property	Husban Wife, Joint, Commun	Debt	Current Value of or's Interest in Property, ithout Deducting any red Claim or Exemption
	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х				
	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Х				
	Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
	Interests in partnerships or joint ventures. Itemize.	X				
	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X				
6.	Accounts receivable.		DUE SOUTH BUILDERS, MICHAEL BROWN, 108 KEITH DRIVE, GREENVILLE, SC 29607 DEBTOR INVESTED (\$100,000) IN BUSINESS; DEBTOR STATES THAT SHE HAS NOT BEEN REPAID ANY PART OF INVESTMENT DEBTOR DOES NOT BELIEVE THAT THIS IS COLLECTIBLE	-		0.00
	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
8.	Other liquidated debts owed to debto including tax refunds. Give particular	r <b>X</b> rs.				
	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
			<i>(</i> T	Sub- otal of this pag	Total >	0.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Joann Carol Vassallo			Case No	10-01459	
-		Debtor	.,			

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Communion Shoot)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	, ,	2005 DODGE 1500 RAM: VIN 1D7HUI8DI5SI69935. 4 doors. 8 cylinders. Odometer: 101,009 miles. Purchased in 2006. Financed by Regional Finance. Vehicle payments are being paid by American Bankers Life while debtor is disabled. KBB Value \$4,600.00	-	4,600.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
				C1- T	4 600 00
			(Total	Sub-Tota of this page)	al > 4,600.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Joann Carol Vassallo			Case No	10-01459	
		_ ,	•7			

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	Х			_
35. Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 6,975.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (12/07)

In re	Joann Carol Vassallo	Case No.	10-01459
		<del>,</del>	

Debtor

SCHEDULE C -	SCHEDULE C - PROPERTY CLAIMED AS EXEMPT										
Debtor claims the exemptions to which debtor is entitled us (Check one box)  11 U.S.C. §522(b)(2)  11 U.S.C. §522(b)(3)	nder: Check if debtor cl \$136,875.	aims a homestead exe	mption that exceeds								
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption								
Real Property PRIMARY RESIDENCE: 3550 CANNONS CAMPGROUND ROAD, SPARTANBURG, SC, SPARTANBURG COUNTY; TMS# (3-13-00-043.03), TAX APPRAISAL VALUE: (\$183,200), DEBTOR PURCHASED HOME IN MAY 2006 FOR (\$183,000), DEBTOR'S OPINION OF CURRENT MARKET VALUE: (\$226,000)	S.C. Code Ann. § 15-41-30(A)(1) S.C. Code Ann. § 15-41-30(A)(7) (A) (7) for unused Household Goods Exemption	51,450.00 2,250.00	226,000.00								
Household Goods and Furnishings HOUSEHOLD GOODS: COUCH, (3) BEDS, (2) DRESSERS, (2) CHEST OF DRAWERS, NIGHTSTANDS, DINING TABLE WITH CHAIRS, COUCH, CHAIRS, REFRIGERATOR, COMPUTER	S.C. Code Ann. § 15-41-30(A)(3)	1,600.00	1,600.00								
Books, Pictures and Other Art Objects; Collectibles ASSORTED BOOKS, COLLECTIBLES & PICTURES	S.C. Code Ann. § 15-41-30(A)(3)	75.00	75.00								
Wearing Apparel CLOTHING: ASSORTED USED CLOTHING	S.C. Code Ann. § 15-41-30(A)(3)	200.00	200.00								
Furs and Jewelry JEWELRY: ASSORTED JEWELRY	S.C. Code Ann. § 15-41-30(A)(4)	500.00	500.00								
Automobiles, Trucks, Trailers, and Other Vehicles 2005 DODGE 1500 RAM: VIN 1D7HUI8DI5SI69935. 4 doors. 8 cylinders. Odometer: 101,009 miles. Purchased in 2006. Financed by Regional Finance. Vehicle payments are being paid by American Bankers Life while debtor is disabled. KBB Value \$4,600.00	S.C. Code Ann. § 15-41-30(A)(2)	5,150.00	4,600.00								

Total: 61,225.00 232,975.00

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B6D (Official Form 6D) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459	
		Debtor ,			

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	Ť		ured claims to report on this schedule D.	_	_			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH-ZGHZ	M-AD-CA-LZC	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 103333043			Opened 2/01/07 Last Active 6/19/08	Т	T E			
OCWEN LOAN SERVICING L 12650 INGENUITY DR ORLANDO, FL 32826		-	Mortgage PRIMARY RESIDENCE: 3550 CANNONS CAMPGROUND ROAD: ARREARS TO BE PAID IN PLAN (\$50,000), DEBTOR TO RESUME PAYMENTS APRIL 2010		D			
	1		Value \$ 226,000.00				197,858.82	0.00
Account No.  REGIONAL FINANCE 195A SOUTH CONVERSE ST Spartanburg, SC 29306		-	Auto Ioan  2005 DODGE 1500 RAM: TO BE PAID OUTSIDE OF PLAN BY INSURANCE					
			Value \$ 4,600.00				14,000.00	9,400.00
Account No.			Value \$					
Account No.			Value \$					
<b>0</b> continuation sheets attached		•	S (Total of th	ubt nis p			211,858.82	9,400.00
			(Report on Summary of Sc.		ota ule	- 1	211,858.82	9,400.00

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B6E (Official Form 6E) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459
_		.,		
		Debtor		

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### ■ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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 $B6E\ (Official\ Form\ 6E)\ (12/07)$  - Cont.

In re	Joann Carol Vassallo		Case No	10-01459	
_		Debtor			

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

### **Domestic Support Obligations**

							TYPE OF PRIORITY	•
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBLOR	Hu H W J C	Sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED  AND CONSIDERATION FOR CLAIM	N	UNLIQUIDA	UMHC40-U	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No. 5253			2006	Т	D A T E D			
IRS NOTICE Centralized Insovency Operation PO Box 21126 Philadelphia, PA 19114		-	Federal Income Taxes					0.00
	_	$\vdash$		+	-		3,139.00	3,139.00
Account No.								
Account No.								
Account No.		T						
Account No.								
Sheet 1 of 2 continuation sheets a	attache	d to		Sub	tota	1		0.00
Schedule of Creditors Holding Unsecured F				this	pag	ge)	3,139.00	3,139.00

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 $B6E\ (Official\ Form\ 6E)\ (12/07)$  - Cont.

In re	Joann Carol Vassallo		_	Case No	10-01459	
_		Debtor	,			

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

				W	ag	es,	salaries, and com	missions
							TYPE OF PRIORIT	7
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H V J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	I C	!  Y	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY  AMOUN ENTITLED T PRIORIT
Account No.			Fees	Τ̈́	E			
MOSS & ASSOCIATES, ATTORNEYS P.A. 11 CALEDON CT. SUITE D Greenville, SC 29615		_					2,304.00	2,304.0
Account No.								
Account No.								
Account No.								
Account No.								
Sheet 2 of 2 continuation sheets attack				Sub				0.00
Schedule of Creditors Holding Unsecured Prior	ity	Cl	aims (Total of				2,304.00	2,304.0
			(Report on Summary of S		Tot		5,443.00	0.00 5,443.0

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B6F (Official Form 6F) (12/07)

In re	Joann Carol Vassallo			Case No	10-01459	
		Debtor	_,			

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ţç	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		UNLLQULDA	U T E D	AMOUNT OF CLAIM
Account No. A18282542			Opened 7/01/04 Last Active 6/09/06 CollectionAttorney WAKE MEDICAL CENTER	٦Ÿ	A T E D		
Acs/Absolute Credit Service 421 FAYETTEVILLE ST STE 600 RALEIGH, NC 27601		-	Concondition of Water Medical Center				34.00
Account No. <b>2025129562</b>	+	$\vdash$	Opened 1/01/08	+			04.00
AFNI, INC. ATTN: DP RECOVERY SUPPORT PO BOX 3427 BLOOMINGTON, IL 61702		-	FactoringCompanyAccount CHARTER COMMUNICATIONS				122.00
Account No. 9270460001692453  CAB Collections PO BOX 62889 N CHARLESTON, SC 29419		-	MED1 02 SPARTANBURG RADIOLOGICAL				320.00
Account No. 2203083  JL WALSTON & ASSOCIATE 1530 N GREGSON ST DURHAM, NC 27701		-	Opened 6/01/04 CollectionAttorney RALEIGH PLASTIC SURGERY CENT				3,088.00
continuation sheets attached			(Total of	Sub this			3,564.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Joann Carol Vassallo		Case No	10-01459	
_		Debtor			

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS	COD	Hu	sband, Wife, Joint, or Community	CONT.	U N L	D I S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	TINGENT	συ	1 =	AMOUNT OF CLAIM
Account No. 699609312			06 NATIONWIDE INSURANCE	Ϊ	D A T E D		
Nco Financial Systems 507 PRUDENTIAL RD HORSHAM, PA 19044		-					222.00
Account No. <b>704370430</b>			06 NATIONWIDE INSURANCE				
Nco Financial Systems 507 PRUDENTIAL RD HORSHAM, PA 19044		-					
							143.00
Account No. 6020460000849667  ONLINE COLLECTIONS 202 W FIRE TOWER RD WINTERVILLE, NC 28590		-	Opened 8/01/05 CollectionAttorney BETSY JOHNSON REGIONAL				1,333.00
Account No. <b>532828</b>			Opened 12/01/05		F		
OPTIMA RECOVERY SERVIC ATTN: BANKRUPTCY PO BOX 52968 KNOXVILLE, TN 37950		-	CollectionAttorney UPSTATE CAROLINA RADIOLOGY				257.00
Account No. 771332		T	Opened 11/01/06		Г		
OPTIMA RECOVERY SERVIC ATTN: BANKRUPTCY PO BOX 52968 KNOXVILLE, TN 37950		-	CollectionAttorney PALMETTO ANESTHESIA ASSOC				202.00
Sheet no1 of _3 sheets attached to Schedule of					tota		2,157.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Joann Carol Vassallo		Case No	10-01459	
		Debtor			

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	00	N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT - NGENT	Z	S P U T	AMOUNT OF CLAIM
Account No. 411R010150432070			Opened 12/01/07	Т	ΙEΙ		
RJM ACQ LLC 575 UNDERHILL BLVD STE 2 SYOSSET, NY 11791		-	FactoringCompanyAccount WACHOVIA BANK CHECKING ACCOUNT		D		109.00
Account No.			Unsecured State Taxes				
SC DEPT OF REVENUE PO BOX 12265 Columbia, SC 29211		-					0.00
Account No.	t	t	NOTICE ONLY	H			
SPARTANBURG COUNTY TAX 366 N. CHURCH ST STE 300 Spartanburg, SC 29303		-					0.00
Account No. <b>25709</b>	t	t	Opened 11/01/04	H	Н		
TIGER TRANZ 2612 JACKSON AVE W OXFORD, MS 38655		-	ReturnedCheck PIGGLY WIGGLY 128 SP				121.00
Account No. <b>25708</b>	$\vdash$	+	Opened 11/01/04	$\vdash$		$\vdash$	
TIGER TRANZ 2612 JACKSON AVE W OXFORD, MS 38655		-	ReturnedCheck PIGGLY WIGGLY 128 SP				80.00
Sheet no. 2 of 3 sheets attached to Schedule of			2	Subt	ota	l	310.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	310.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Joann Carol Vassallo		Case No	10-01459	
		Debtor			

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	S	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No. <b>24753</b>			CHARTER COMMUNICATIONS	T	T E		
TIGER TRANZ 2612 JACKSON AVE W OXFORD, MS 38655		-			D		80.00
Account No. <b>983067</b>	$\dashv$		Opened 9/01/09				
TIGER TRANZ 2612 JACKSON AVE W OXFORD, MS 38655		-	ReturnedCheck THE PRESCRIPTION CENTER SP				
							65.00
Account No. 24752  TIGERTRANZ 2612 JACKSON AVE W OXFORD, MS 38655		-	Opened 12/01/04 ReturnedCheck CHECKCARE				
							44.00
Account No.							14.50
Account No.							
Sheet no. <u>3</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		S (Total of t		tota		189.00
Creations froming Onsecured Nonphority Claims			(Total of the				
			(Report on Summary of Sc		lule		6,220.00

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B6G (Official Form 6G) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459	
_					
		Debtor			

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 10-01459-hb Doc 11 Filed 03/19/10 Entered 03/19/10 14:51:22 Desc Main Document Page 18 of 38

B6H (Official Form 6H) (12/07)

In re	Joann Carol Vassallo		Case No	10-01459	
		Debtor	,		

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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B6I (Official Form 6I) (12/07)

In re	Joann Carol Vassallo		Case No.	10-01459	
		Debtor(s)			

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

3	, ,				
Destor's Warter States.		S OF DEBTOR AND SP	OUSE		
	RELATIONSHIP(S):	AGE(S):			
Employment:  Occupation  Name of Employer  How long employed  Since 7  Address of Employer  INCOME: (Estimate of average or projected 1. Monthly gross wages, salary, and commissi 2. Estimate monthly overtime  3. SUBTOTAL  4. LESS PAYROLL DEDUCTIONS  a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify):  5. SUBTOTAL OF PAYROLL DEDUCTION  6. TOTAL NET MONTHLY TAKE HOME  7. Regular income from operation of business 8. Income from real property 9. Interest and dividends	None.				
<b>Employment:</b>	DEBTOR		SPOUSE		
Occupation	Disabled (Long-term)				
Name of Employer	N/A				
	Since 7/09				
Address of Employer					
INCOME: (Estimate of avera	age or projected monthly income at time case filed)		DEBTOR		SPOUSE
	y, and commissions (Prorate if not paid monthly)	\$	0.00	\$	N/A
2. Estimate monthly overtime		\$	0.00	\$	N/A
3. SUBTOTAL		\$	0.00	\$	N/A
4. LESS PAYROLL DEDUC	TIONS				
<ol> <li>Payroll taxes and social</li> </ol>	al security	\$	0.00	\$	N/A
b. Insurance		\$	0.00	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify):			0.00	\$	N/A
			0.00	\$	N/A
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	0.00	\$	N/A
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$	0.00	\$	N/A
7. Regular income from operation	tion of business or profession or farm (Attach detailed stat	tement) \$	0.00	\$	N/A
8. Income from real property		\$	0.00	\$	N/A
9. Interest and dividends		\$	0.00	\$	N/A
dependents listed above	support payments payable to the debtor for the debtor's use	e or that of \$	0.00	\$	N/A
		\$	250.00	\$	N/A
(Speens). <u>1999</u>			0.00	\$ <del></del>	N/A
12. Pension or retirement inco	ome		0.00	\$ <del>-</del>	N/A
13. Other monthly income		· <del>_</del>		· <del>-</del>	
3	RTFORD LONG-TERM DISABILITY	\$	2,138.13	\$	N/A
HELP FF	ROM CHILDREN (STARTED JAN 2010)	\$	1,200.00	\$	N/A
14. SUBTOTAL OF LINES 7	7 THROUGH 13	\$	3,588.13	\$	N/A
15. AVERAGE MONTHLY	INCOME (Add amounts shown on lines 6 and 14)	\$	3,588.13	\$	N/A
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals from line	e 15)	\$	3,588.	13
		1			

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **DEBTOR DOES NOT ANTICIPATE A CHANGE OF INCOME**.

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B6J (Official Form 6J) (12/07)

In re	Joann Carol Vassallo		Case No.	10-01459
		Debtor(s)		

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22	The average	
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complet expenditures labeled "Spouse."	te a separate	schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,618.63
a. Are real estate taxes included? Yes X No	Ψ	
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	125.00
b. Water and sewer	\$	12.50
c. Telephone	\$	0.00
d. Other See Detailed Expense Attachment	\$	135.00
3. Home maintenance (repairs and upkeep)	\$	20.00
4. Food	\$	150.00
5. Clothing	\$	10.00
6. Laundry and dry cleaning	\$	10.00
7. Medical and dental expenses	\$	195.00
8. Transportation (not including car payments)	\$	150.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	25.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	55.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) Auto Property Tax	\$	26.67
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the		
plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$	0.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,532.80
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
DEBTOR DOES NOT ANTICIPATE A CHANGE OF EXPENSES. DEBTOR'S MEDICAL EXPENSES ARE HIGHER THAN AVERAGE DUE TO MEDICINE & TREATMENT RELATED TO CANCER.		
20. STATEMENT OF MONTHLY NET INCOME	_	
	¢	3,588.13
<ul><li>a. Average monthly income from Line 15 of Schedule I</li><li>b. Average monthly expenses from Line 18 above</li></ul>	\$	2,532.80
b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	\$ <del></del>	1,055.33

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

# **Other Utility Expenditures:**

Cable	\$ 90.00
Cellular	\$ 45.00
Total Other Utility Expenditures	\$ 135.00

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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# **United States Bankruptcy Court District of South Carolina**

In re	Joann Carol Vassallo		Case No.	10-01459
		Debtor(s)	Chapter	13

# DECLARATION CONCERNING DERTOR'S SCHEDULES

	DECLARATION CONCERNING DEDICAR 5 SCHEDULES					
	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR					
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 2 sheets, and that they are true and correct to the best of my knowledge, information, and belief.					
Date	March 19, 2010	Signature	/s/ Joann Carol Vassallo Joann Carol Vassallo Debtor			

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (12/07)

# United States Bankruptcy Court District of South Carolina

In re	Joann Carol Vassallo	Case No.	10-01459	
		Debtor(s)	Chapter	13

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$0.00	2010 YTD: N/A
\$0.00	2009: N/A

\$42,762.63 2008: White Directory Carolina (Debtor has not worked since December 2008)

\$32,629.00 2007: White Directory Carolina \$45,402.00 2006: White Directory Carolina None 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT SOURCE** 

2010 YTD: THE HARTFORD LONG TERM DISABILITY(DEBTOR) \$6,414.39

2009: THE HARTFORD DISABILITY BENEFITS (Debtor received Short Term \$12,828.78

Disability until August 2009, then debtor began receiving Long-Term Disability)

\$0.00 2008: N/A \$0.00 2007: N/A

\$1,000,814.00 2006: LOTTERY WINNINGS (GROSS WINNINGS: 1,000,000, AFTER TAXES OF

\$250,000, DEBTOR RECEIVED NET WINNINGS OF \$750,000) - debtor used money to make improvements to home \$65,000, attorney's fees related to divorce, divorce settlement of \$25,000, purchased Toyota Sequoia \$23,700 (debtor traded this vehicle in on Volkswagon which was repo'd), purchase 2005 Dodge Ram Pickup, debtor invested \$100,000 in 'Due South Builders' business)/ WAHCOVIA

RETIREMENT (\$3,814) / FIRST CLEARING LLC DIVIDENDS(DEBTOR)

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **PAYMENTS OWING** 

None

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS OWING TRANSFERS** 

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

2

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None 

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

HSBC BANK USA, NA **JOANN V COTE** 

**BREACH OF CONTRACT** 

COUNTY OF SPARTANBURG CHAPTER 13 FILING

STATE OF SOUTH CAROLINA FORECLOSURE STAYED BY

**COURT OF COMMON PLEAS** 

CASE# 08-CP-42-1873

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DATE OF REPOSSESSION.

DESCRIPTION AND VALUE OF

**PROPERTY** 

5. Repossessions, foreclosures and returns

None 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER NO PROBLEM AUTO SALES 8191 WARREN H. ABERNATHY HWY

Spartanburg, SC 29301

FORECLOSURE SALE. TRANSFER OR RETURN September 23, 2008

DESCRIPTION AND VALUE OF **PROPERTY** 

2000 VW Beetle, KBB Value at time of repossesion \$3.220. Amount owed to No Problem Auto Sales at time of repossesion \$5,000.

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF **PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION **RELATIONSHIP TO** DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

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8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Moss & Associates, Attorneys, P.A. 11 Caledon Court, Suite D Greenville, SC 29615

In Charge Debt Solutions 2101 Park Center Drive Suite D Orlando, FL 32835 DATE OF PAYMENT,
NAME OF PAYOR IF OTHER
THAN DEBTOR
Fobrillary 2010

February 2010

February 2010

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

Attorney Fees: \$696.00 Filing Fee: \$274.00

Credit Counseling Fee: \$30.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

5

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

NAME AND ADDRESS OF OWNER

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

DESCRIPTION AND VALUE OF PROPERTY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### Former Spouse: John Cote

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** 

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.

Indicate the governmental unit to which the notice was sent and the date of the notice.

**ENVIRONMENTAL** NAME AND ADDRESS OF DATE OF

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the

debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

**BEGINNING AND** ADDRESS NATURE OF BUSINESS **ENDING DATES** (ITIN)/ COMPLETE EIN

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

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Best Case Bankruptcy

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within **two years** immediately preceding the commencement of this case.

20. Inventories

NAME AND ADDRESS

DATE OF INVENTORY

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and

**RECORDS** 

DATE ISSUED

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DOLLAR AMOUNT OF INVENTORY

the dollar amount and basis of each inventory.

DATE OF INVENTORY INVENTORY SUPERVISOR (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the

commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF WITHDRAWAL
OF DESCRIPTION AND
VALUE OF PROPERTY

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24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	March 19, 2010	Signature	/s/ Joann Carol Vassallo	
		_	Joann Carol Vassallo	
			Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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**B22C** (Official Form 22C) (Chapter 13) (01/08)

In re Joann	Carol Vassallo	According to the calculations required by this statement:
Case Number:	Debtor(s) 10-01459 (If known)	<ul> <li>The applicable commitment period is 3 years.</li> <li>□ The applicable commitment period is 5 years.</li> <li>□ Disposable income is determined under § 1325(b)(3).</li> </ul>
		■ Disposable income is not determined under § 1325(b)(3).  (Check the boxes as directed in Lines 17 and 23 of this statement.)

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPOR	OF INCOME			
1	Marital/filing status. Check the box that applies and complete ta. ■ Unmarried. Complete only Column A ("Debtor's Income" b. □ Married. Complete both Column A ("Debtor's Income")	') for Lines 2-10.			
	All figures must reflect average monthly income received from a calendar months prior to filing the bankruptcy case, ending on th filing. If the amount of monthly income varied during the six mosix-month total by six, and enter the result on the appropriate lin	sources, derived during the six last day of the month before the ths, you must divide the	1	Column A Debtor's Income	Column B Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.		\$	0.00	\$
3	Income from the operation of a business, profession, or farm enter the difference in the appropriate column(s) of Line 3. If you profession or farm, enter aggregate numbers and provide details number less than zero. Do not include any part of the business deduction in Part IV.	operate more than one business, in an attachment. Do not enter a expenses entered on Line b as a			
	Debt	r Spouse 0.00 \$			
	a. Gross receipts \$ b. Ordinary and necessary business expenses \$	0.00 \$			
		b from Line a	\$	0.00	\$
4	Rents and other real property income. Subtract Line b from I the appropriate column(s) of Line 4. Do not enter a number less part of the operating expenses entered on Line b as a deduct Deb	nan zero. Do not include any on in Part IV.			
	a. Gross receipts \$	0.00 \$			
	b. Ordinary and necessary operating expenses \$	0.00   \$			
	c. Rent and other real property income Subtract Li	e b from Line a	\$	0.00	\$
5	Interest, dividends, and royalties.		\$	0.00	\$
6	Pension and retirement income.		\$	0.00	\$
7	Any amounts paid by another person or entity, on a regular expenses of the debtor or the debtor's dependents, including purpose. Do not include alimony or separate maintenance paym debtor's spouse.	\$	400.00	\$	
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$	<b>5.00</b> Spouse \$	\$	0.00	\$

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse				
	a.   Long-term Disability   \$   2,138.13   \$	2,388.13	\$		
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	2,788.13	\$		
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		2,788.13		
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIO	D			
12	Enter the amount from Line 11	\$	2,788.13		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spenter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis household expenses of you or your dependents and specify, in the lines below, the basis for excluding this inc (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.    S	ouse, s for the come lebtor's			
	Total and enter on Line 13	\$	0.00		
14	Subtract Line 13 from Line 12 and enter the result.	\$	2,788.13		
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 1 enter the result.	12 and \$	33,457.56		
16	<b>Applicable median family income.</b> Enter the median family income for applicable state and household size. information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	(This			
	a. Enter debtor's state of residence: SC b. Enter debtor's household size: 1	\$	39,191.00		
17	<ul> <li>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</li> <li>■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commit top of page 1 of this statement and continue with this statement.</li> <li>□ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable continue top of page 1 of this statement and continue with this statement.</li> </ul>				
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCO	OME			
18	Enter the amount from Line 11.	\$	2,788.13		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.				
	b.				
	Total and enter on Line 19.	\$	0.00		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	2.788.13		

21	Annualized current monthly income for § 1325(b)(a enter the result.	3). Multip	ly the amount from Line 20 by the number	12 and \$	33,457.56
22	Applicable median family income. Enter the amount	from Line	216.	\$	39,191.00
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed.  The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determing 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.  The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part				etermined under §
			DEDUCTIONS FROM INCO	_	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Subpart A: Deductions under	Standar	ds of the Internal Revenue Service (	IRS)	
24A	National Standards: food, apparel and services, ho Enter in Line 24A the "Total" amount from IRS Nation applicable household size. (This information is availa court.)	nal Standa	rds for Allowable Living Expenses for the		·
National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.				oj.gov/ust/ o are under older. ne a1 by Line a2 dd Lines	
	Household members under 65 years of age		sehold members 65 years of age or olde	r	
	a1. Allowance per member b1. Number of members	b2.	Allowance per member  Number of members		
	c1. Subtotal	c2.	Subtotal		
25A	Local Standards: housing and utilities; non-mortga Utilities Standards; non-mortgage expenses for the appavailable at www.usdoj.gov/ust/ or from the clerk of the	age expen	ses. Enter the amount of the IRS Housing punty and household size. (This information		
Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rent Expense  b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47  c. Net mortgage/rental expense  Subtract Line b from Line a.				on is Average	
26	Local Standards: housing and utilities; adjustment does not accurately compute the allowance to which you enter any additional amount to which you contend you below:	ou are enti	tled under the IRS Housing and Utilities St	andards, n the space	
				\$	

27A	<b>Local Standards: transportation; vehicle operation/public transpo</b> expense allowance in this category regardless of whether you pay the ex of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses included as a contribution to your household expenses in Line 7.   0				
	If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1				
	a. IRS Transportation Standards, Ownership Costs	\$			
	Average Monthly Payment for any debts secured by Vehicle 1,	\$			
	b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$		
29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs	\$			
	Average Monthly Payment for any debts secured by Vehicle 2, b. as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
30	<b>Other Necessary Expenses: taxes.</b> Enter the total average monthly ex state, and local taxes, other than real estate and sales taxes, such as inco security taxes, and Medicare taxes. <b>Do not include real estate or sales</b>	ome taxes, self employment taxes, social	\$		
31	Other Necessary Expenses: mandatory deductions for employment deductions that are required for your employment, such as mandatory reuniform costs. Do not include discretionary amounts, such as volume	etirement contributions, union dues, and	\$		
32	Other Necessary Expenses: life insurance. Enter total average month life insurance for yourself. Do not include premiums for insurance of any other form of insurance.		\$		
33	Other Necessary Expenses: court-ordered payments. Enter the total pursuant to the order of a court or administrative agency, such as spous payments on past due obligations included in line 49.		\$		
34	Other Necessary Expenses: education for employment or for a phy the total average monthly amount that you actually expend for educatio education that is required for a physically or mentally challenged depen providing similar services is available.	on that is a condition of employment and for	\$		
35	Other Necessary Expenses: childcare. Enter the total average month childcare - such as baby-sitting, day care, nursery and preschool. <b>Do no</b>		\$		

36	Other Necessary Expenses: health care. Enter the average care that is required for the health and welfare of yourself or paid by a health savings account, and that is in excess of the for health insurance or health savings accounts listed in	\$	
37	Other Necessary Expenses: telecommunication services actually pay for telecommunication services other than your pagers, call waiting, caller id, special long distance, or interwelfare or that of your dependents. Do not include any an	\$	
38	Total Expenses Allowed under IRS Standards. Enter th	e total of Lines 24 through 37.	\$
	-	al Living Expense Deductions nses that you have listed in Lines 24-37	
	Health Insurance, Disability Insurance, and Health Sav the categories set out in lines a-c below that are reasonably		
39	a. Health Insurance b. Disability Insurance	\$ \$	
	c. Health Savings Account	\$	
	Total and enter on Line 39		\$
	If you do not actually expend this total amount, state you below:  \$		
40	Continued contributions to the care of household or fan expenses that you will continue to pay for the reasonable and or disabled member of your household or member of your in <b>Do not include payments listed in Line 34.</b>	\$	
41	<b>Protection against family violence.</b> Enter the total average incur to maintain the safety of your family under the Family federal law. The nature of these expenses is required to be keepenses.	\$	
42	Home energy costs. Enter the total average monthly amou Standards for Housing and Utilities, that you actually exper trustee with documentation of your actual expenses, and claimed is reasonable and necessary.	\$	
43	Education expenses for dependent children under 18. E incur, not to exceed \$137.50 per child, for attendance at a p dependent children less than 18 years of age. You must pre actual expenses, and you must explain why the amount accounted for in the IRS Standards.	\$	
44	Additional food and clothing expense. Enter the total ave expenses exceed the combined allowances for food and clot Standards, not to exceed 5% of those combined allowances from the clerk of the bankruptcy court.) You must demons reasonable and necessary.	\$	
45	<b>Charitable contributions.</b> Enter the amount reasonably ne contributions in the form of cash or financial instruments to 170(c)(1)-(2). <b>Do not include any amount in excess of 15</b>	\$	
46	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 39 through 45.		\$
	•		•

			Subpart C: Deductions for	r Debt	Payment		
47	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.						
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance	
	a.			\$	_	□yes □no	
					Total: Add Lines		\$
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
	I	Name of Creditor	Property Securing the Debt			the Cure Amount	
	a.				\$	Total: Add Lines	\$
49	priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.  Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.						\$
50	b.	Current multiplier for y issued by the Executive information is available the bankruptcy court.)	hly Chapter 13 plan payment. Four district as determined under schedule Office for United States Trustees. (This e at www.usdoj.gov/ust/ or from the clerk	s k of	K		
	c.	Average monthly admir	nistrative expense of Chapter 13 case	7	Total: Multiply Li	nes a and b	\$
51	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 47 through 50.					\$	
			Subpart D: Total Deduction	ns fro	om Income		
52	Total o	of all deductions from i	<b>ncome.</b> Enter the total of Lines 38, 46, a	and 51.			\$
		Part V. DETE	RMINATION OF DISPOSAB	LE IN	COME UNDI	ER § 1325(b)(2)	
53	<b>Total current monthly income.</b> Enter the amount from Line 20.					\$	
54	<b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					\$	
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).				\$		
56	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the amount from Line 52.			\$			

	Deduction for there is no reasonecessary, list a provide your of the special of				
57	Nature o	of special circumstances	Amo	ount of Expense	]
	a.		\$		]
	b.		\$		
	c.		\$		<u>]</u>
			Tota	al: Add Lines	\$
58	<b>Total adjustments to determine disposable income.</b> Add the amounts on Lines 54, 55, 56, and 57 and enter the result.			\$	
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.				\$
		Part VI. ADDI	TIONAL EXPENSE	CLAIMS	
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health are you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item expenses.				
60	Expense	Description		Monthly Amount	]
	a.			\$	
	b.			\$	
	c.			\$	-
	d.	T. ( 1	A 11T' 1 1 1	\$ \$	-
		1 otai:	Add Lines a, b, c and d	2	
		Par	t VII. VERIFICATION		
61	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint must sign.)  Date: March 19, 2010 Signature: /s/ Joann Carol Vassallo				case, both debtors
61	1	Maion 19, 2010		Joann Carol Vassallo (Debtor)	

# **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2009 to 02/28/2010.

### Line 7 - Contributions to household expenses of the debtor or dependents

Source of Income: HELP FROM CHILDREN (STARTED JAN 2010)

Income by Month:

6 Months Ago:	09/2009	\$0.00
5 Months Ago:	10/2009	\$0.00
4 Months Ago:	11/2009	\$0.00
3 Months Ago:	12/2009	\$0.00
2 Months Ago:	01/2010	\$1,200.00
Last Month:	02/2010	\$1,200.00
	Average per month:	\$400.00

#### Line 9 - Income from all other sources

Source of Income: Long-term Disability

Income by Month:

6 Months Ago:	09/2009	\$2,138.13
5 Months Ago:	10/2009	\$2,138.13
4 Months Ago:	11/2009	\$2,138.13
3 Months Ago:	12/2009	\$2,138.13
2 Months Ago:	01/2010	\$2,138.13
Last Month:	02/2010	\$2,138.13
	Average per month:	\$2,138.13

### Line 9 - Income from all other sources

Source of Income: **FOOD STAMPS**Constant income of **\$250.00** per month.